

UNITED STATES DISTRICT COURT

RECEIVED
District ofElijah Loleman,
Plaintiff

2008 FEB 15 A 9:41

APPLICATION TO PROCEED

WITHOUT PREPAYMENT OF
U.S. DISTRICT FEES AND AFFIDAVIT
MIDDLE DISTRICT ALAv.
Dept. of Corrections Et Al

Defendant

CASE NUMBER: 2:08CV109-F

I, Elijah Loleman

declare that I am the (check appropriate box)

 petitioner/plaintiff/movant other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915 I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? Yes No (If "No," go to Part 2)

If "Yes," state the place of your incarceration W.E. Donaldson Corr. Fac.

Are you employed at the institution? No Do you receive any payment from the institution? No

Attach a ledger sheet from the institution(s) of your incarceration showing at least the past six months' transactions.

2. Are you currently employed? Yes No

a. If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer.

b. If the answer is "No," state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer. JAN. 10, 2005 \$300, plus per week, Bonnik Plant Farm, Union Springs, Alabama

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|---|------------------------------|--|
| a. Business, profession or other self-employment | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b. Rent payments, interest or dividends | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d. Disability or workers compensation payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| e. Gifts or inheritances | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| f. Any other sources | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

If the answer to any of the above is "Yes," describe, on the following page, each source of money and state the amount received and what you expect you will continue to receive.

4. Do you have any cash or checking or savings accounts? Yes No

If "Yes," state the total amount. _____

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other thing of value? Yes No

If "Yes," describe the property and state its value.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.

None

I declare under penalty of perjury that the above information is true and correct.

July 19, 2007

Date

Elijah Coleman

Signature of Applicant

NOTICE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

FINANCIAL STATEMENT OF INMATE'S PRISON ACCOUNT

I certify that according to the records on file in this institution, the Figures set out below are the approximate average daily balances in the Account of inmate Elijah Coleman
(NAME)
for the previous six months.

<u>Month</u>	<u>Balance</u>
1.	\$ 0.16 <i>emc</i>
2.	
3.	
4.	
5.	
6.	

Ephony Coleman
Authorized Officer of the Institution

10 December 2007
Date

SWORN TO AND SUBSCRIBED BEFORE ME AND GIVEN UNDER MY HAND AND
OFFICIAL SEAL THIS 10th DAY OF December, 2007.

Patricia H. Parsons
NOTARY PUBLIC

MY COMMISSION EXPIRES: 5/31/2008

STATE OF ALABAMA
DEPARTMENT OF CORRECTIONS
W. E. DONALDSON CORR. FACILITY

AIS #: 250079 NAME: COLEMAN, ELIJAH AS OF: 12/10/2007

MONTH	# OF DAYS	AVG DAILY BALANCE	MONTHLY DEPOSITS
DEC	21	\$0.00	\$0.00
JAN	31	\$0.00	\$0.00
FEB	28	\$0.00	\$0.00
MAR	31	\$0.00	\$0.00
APR	30	\$0.00	\$0.00
MAY	31	\$0.00	\$0.00
JUN	30	\$2.01	\$2.98
JUL	31	\$0.16	\$0.00
AUG	31	\$0.16	\$0.00
SEP	30	\$0.16	\$0.00
OCT	31	\$0.16	\$0.00
NOV	30	\$0.16	\$0.00
DEC	10	\$0.16	\$0.00